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APPLICANTS

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** CONTINUING DATA *****

m6B

This application is a DIV of 09/370,305 08/09/1999 PAT 6,709,421

** FOREIGN APPLICATIONS *****

m6B

UNITED KINGDOM 9817677.9 08/13/1998

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>26.89</i> Examiner's Signature	Initials			

ADDRESS

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TITLE

Ostomy pouches

FILING FEE RECEIVED 770	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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